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FACSIMILE TRANSMISSIONDATE: **February 20, 2006**TIME IN:
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Name	Fax Number	Phone Number
Examiner Daniel I. Walsh - U.S. Patent and Trademark Office	571-273-8300	571-272-2800

FROM: Kirk Dorius

PHONE: 602-382-6544

RE:

MESSAGE:

Attached is a Request for Continued Examination (RCE) for Serial No. 10/710,308

ORIGINAL DOCUMENT: Will not be sent

NUMBER OF PAGES (Including Cover): **(3) w/w**

CONFIRMATION NO.:

CLIENT MATTER NO.: 70655.1400

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PAGE 1/3 * RCVD AT 2/21/2006 1:44:57 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-6/24 * DNIS:2738300 * CSID:602 382 6070 * DURATION (mm:ss):01:18

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PTO/SB/17 (01-06)
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Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4819).

FEE TRANSMITTAL For FY 2006

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$)	790.00
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Complete If Known

Application Number	10/710,308
Filing Date	July 1, 2004
First Named Inventor	David S. Bonalle, et al.
Examiner Name	Daniel I. Walsh
Art Unit	2876
Attorney Docket No.	70655.1400

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: 19-2814 Deposit Account Name: Snell & Wilmer LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)	Fee (\$)	Small Entity Fee (\$)
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x	=				

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=			

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount) Fee Paid (\$)

Other (e.g., late filing surcharge): Request for Continued Examination (RCE) 790.00

SUBMITTED BY

Signature	<i>Kirk Dorius</i>	Registration No. (Attorney/Agent) 54,073	Telephone (602) 382-6544
Name (Print/Type)	Kirk Dorius	Date February 21, 2006	

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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